



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION SITE NUMBER (to be com-
6 TX6688

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-33); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

TXDOA5217766

A. SITE NAME NALCO CHEMICAL CO.	B. STREET (or other identifier) Texas Highway 80		
C. CITY Odessa	D. STATE TX	E. ZIP CODE 79760	F. COUNTY NAME Ector
G. OWNER/OPERATOR (if known)	H. TELEPHONE NUMBER (915)563-2125		
1. NAME Ron Howard, Mgr.			
H. TYPE OF OWNERSHIP	<input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input checked="" type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN		
I. SITE DESCRIPTION The facility is a distribution center for oil well production treatment chemicals, including corrosion and scale inhibitors and oil dehydrators.			
J. HOW IDENTIFIED (i.e., citizen's complaint, OSRA citations, etc.) Anonymous Call	K. DATE IDENTIFIED (mon, day, & yr) 2/4/80		

L. PRINCIPAL STATE CONTACT	M. TELEPHONE NUMBER (915)445-3615
1. NAME Robert Bradshaw, Region X TDWR Pecos, TX	

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM	<input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input type="checkbox"/> 3. LOW <input checked="" type="checkbox"/> 4. NONE <input type="checkbox"/> 5. UNKNOWN
B. RECOMMENDATION	<input type="checkbox"/> 1. NO ACTION NEEDED (no hazard) <input type="checkbox"/> 2. IMMEDIATE SITE INSPECTION NEEDED 2. TENTATIVELY SCHEDULED FOR: <input type="checkbox"/> 3. SITE INSPECTION NEEDED 3. WILL BE PERFORMED BY: <input type="checkbox"/> 4. WILL BE PERFORMED BY: <input type="checkbox"/> 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION	1. NAME David Anderson - FIT <i>David Anderson</i>	2. TELEPHONE NUMBER (214)742-4521	3. DATE (mon, day, & yr) 5/1/81
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III. SITE INFORMATION

A. SITE STATUS	<input checked="" type="checkbox"/> 1. ACTIVE (Those industrial or municipal sites which are being used for the treatment, storage, or disposal on a continuing basis, even if infrequent.)	<input type="checkbox"/> 2. INACTIVE (Those sites which no longer receive wastes.)	<input type="checkbox"/> 3. OTHER (Specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)
B. IS GENERATOR ON SITE?	<input type="checkbox"/> 1. NO	<input checked="" type="checkbox"/> 2. YES (Specify generator's four-digit SIC Code): None	
C. AREA OF SITE (In acres)	8.2	D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES	
		1. LATITUDE (deg-min-sec.) 31° 54' 19"N	2. LONGITUDE (deg-min-sec.) 102° 14' 50"W SUPERFUND FILE
E. ARE THERE BUILDINGS ON THE SITE?	<input type="checkbox"/> 1. NO <input checked="" type="checkbox"/> 2. YES (Specify):	Warehouse and office building.	
		JAN 05 1993	

T2070-2 (10-79)

RECORDED On/Reverse

REVIEWED BY (GAGH)

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IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

X	A. TRANSPORTER	X	B. STORER	X	C. TREATER	X	D. DISPOSER
1. RAIL		1. PILE		1. FILTRATION		1. LANDFILL	
2. SHIP	X	2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM	
3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP	
4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT	
5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS. TREATMENT		5. MIDNIGHT DUMPING	
6. OTHER (specify):		6. OTHER (specify): 28,000 gallon concrete pit (80' X 80' X 5')		6. BIOLOGICAL TREATMENT		6. INCINERATION	
				7. WASTE OIL REPROCESSING	X	7. UNDERGROUND INJECTION	
				8. SOLVENT RECOVERY		8. OTHER (specify)	
				9. OTHER (specify): Used as flush water in oil fields			

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

Waste consists of chemicals spilled when the treatment trucks are being loaded. The chemicals are dissolved in heavy aromatic solvents. Truck loading area is contained and sloped so that any liquid spilled is collected in the pit. Any rainfall from the area is also collected in the pit. The waste (mainly water) is loaded onto the treatment trucks for use as flush water during well treatment

V. WASTE RELATED INFORMATION

A. WASTE TYPE

1. UNKNOWN 2. LIQUID 3. SOLID 4. SLUDGE 5. GAS

B. WASTE CHARACTERISTICS

1. UNKNOWN 2. CORROSIVE 3. IGNITABLE 4. RADIOACTIVE 5. HIGHLY VOLATILE
 6. TOXIC 7. REACTIVE 8. INERT 9. FLAMMABLE

D. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

No

2. Estimate the amount(specify unit of measure)of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT None	AMOUNT 10,000	AMOUNT None	AMOUNT None	AMOUNT None	AMOUNT None
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
Gallons					
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY PHARMACEUT.
(2) METAL SLUDGES	X (2) OTHER (specify): Oil well production chemicals in water; less than 1% chemical content	(2) NON-HALOGENATED SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify)		

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... WASTE RELATED INFORMATION (continued)				
3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).				
Wastes listed with the solid waste registry (TX). Class I wastes: 1. Waste water - contains organics 2. API waste skimmings				
4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE. The facility is located 3 1/2 miles Northeast of the cemetery mentioned in the complaint. There were no activities noted at this site which could affect the cemetery. Trees are dying in the area but is most likely due to the extended drought and high temperatures of the past summer.				
VI. HAZARD DESCRIPTION				
A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
1. NO HAZARD	X			
2. HUMAN HEALTH				
3. NON-WORKER INJURY/EXPOSURE				
4. WORKER INJURY				
5. CONTAMINATION OF WATER SUPPLY				
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER				
8. CONTAMINATION OF SURFACE WATER				
9. DAMAGE TO FLORA/FAUNA				
10. FISH KILL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS				
13. CONTAMINATION OF SOIL				
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION				
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
17. SEWER, STORM DRAIN PROBLEMS				
18. EROSION PROBLEMS				
19. INADEQUATE SECURITY				
20. INCOMPATIBLE WASTES				
21. MIGRATION DUMPING				
22. OTHER (specify):				

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VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

Texas Solid Waste Registration

1. NPDES PERMIT 2. SPCC PLAN 3. STATE PERMIT/*specify:* #31479
 4. AIR PERMITS 5. LOCAL PERMIT 6. RCRA TRANSPORTER
 7. RCRA STORER 8. RCRA TREATER 9. RCRA DISPOSER

10. OTHER (*specify:*) RCRA #TXD95217766

B. IN COMPLIANCE?

1. YES 2. NO 3. UNKNOWN

C. WITH RESPECT TO (list regulation name & number):

VIII. PAST REGULATORY ACTIONS

- A. NONE B. YES (*complete below*)

IX. INSPECTION ACTIVITY (past or on-going)

- A. NONE B. YES (*complete items 1, 2, 3, & 4 below*)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mon., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
Texas Air Quality Board		State	Yearly Inspection
Texas Dept. of Water Resources		State	Yearly Inspection

X. REMEDIAL ACTIVITY (past or on-going)

- A. NONE B. YES (*complete items 1, 2, 3, & 4 below*)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mon., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

Nalco Chemical Co.
Odessa, Tx. TX 79763

